

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket Number	13/063-2-C2
	First Named Inventor	LLINAS-BRUNET, M.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HEPATITIS C INHIBITOR PEPTIDES

the specification of which

☒ is attached hereto

or

☐ was filed on _____ as United States Application Number or PCT International Application Number

and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) or inventors certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/095,945	August 10, 1998	
60/055,186	August 11, 1997	

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §356(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. PARENT APPLICATION NUMBER	PCT PARENT NUMBER	PARENT FILING DATE	PARENT PATENT NUMBER (if applicable)
09/131,758 09/219,939		August 10, 1998 December 23, 1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

NAME	REGISTRATION NUMBER	NAME	REGISTRATION NUMBER
Robert P. Raymond Mary-Ellen M. Devlin	25,089 27,928	Alan R. Stempel Anthony Bottino Louise G. Bernier	28,991 41,629 38,791

☐ Additional registered practitioner(s) are listed on a supplemental sheet attached hereto.

Direct all correspondence to:


Name	Robert P. Raymond				
Address	Boehringer Ingelheim Corporation				
Address	900 Ridgebury Road, P.O. Box 368				
City	Ridgefield	State	Connecticut	Zip	06877
Country	USA	Telephone	203-798-9988	Fax	203-791-6183

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	Montse	Middle Initial		Family Name	Llinas-Brunet	Suffix e.g. Jr.	
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Inventor's Signature		Date	July 23, 1999
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Residence: City	D.D.O.	State	Qué.	Country	Canada	Citizenship	CA
Post Office Address	14 Rusbrooke						
Post Office Address							
City	D.D.O.	State	Qué.	Zip	H9B 3K6	Country	Canada

☒ Additional inventors are being listed on a supplemental sheet(s) attached hereto.



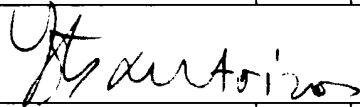
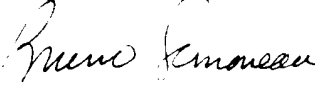
DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Murray			Middle Initial	D.		Family Name	Bailey		Suffix e.g. Jr.	
Inventor's Signature	<i>Murray D. Bailey</i>						Date	July 23, 1999			
Residence: City	Pierrefonds			State	Qué.		Country	Canada		Citizenship	CA
Post Office Address	344 Groulx										
Post Office Address											
City	Pierrefonds			State	Qué.		Zip	H8Y 1B3		Country	Canada
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Dale			Middle Initial			Family Name	Cameron		Suffix e.g. Jr.	
Inventor's Signature	<i>Dale R. Cameron</i>						Date	July 23, 1999			
Residence: City	Rosemère			State	Qué.		Country	Canada		Citizenship	CA
Post Office Address	493 de l'Érablière										
Post Office Address											
City	Rosemère			State	Qué.		Zip	J7A 4M4		Country	Canada
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Elise			Middle Initial			Family Name	Ghiro		Suffix e.g. Jr.	
Inventor's Signature	<i>Elise Ghiro</i>						Date	23 juillet 1999			
Residence: City	Laval			State	Qué.		Country	Canada		Citizenship	CA
Post Office Address	768 Pierre										
Post Office Address											
City	Laval			State	Qué.		Zip	H7X 3L8		Country	Canada
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Nathalie			Middle Initial			Family Name	Goudreau		Suffix e.g. Jr.	
Inventor's Signature	<i>Nathalie Goudreau</i>						Date	July 23 rd 1999			
Residence: City	Mont-Royal			State	Qué.		Country	Canada		Citizenship	CA
Post Office Address	416 Graham										
Post Office Address											
City	Mont-Royal			State	Qué.		Zip	H3P 2C9		Country	Canada
<input checked="" type="checkbox"/> Additional inventors are being listed on a supplemental sheet(s) attached hereto.											

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Marc-André	Middle Initial		Family Name	Poupart	Suffix e.g. Jr.			
Inventor's Signature					Date	JULY 23 RD , 1999			
Residence: City	Vimont	State	Qué.	Country	Canada	Citizenship	CA		
Post Office Address	101 Aimé Séguin								
Post Office Address									
City	Vimont	State	Qué.	Zip	H7M 1B3	Country	Canada		
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Jean	Middle Initial		Family Name	Rancourt	Suffix e.g. Jr.			
Inventor's Signature					Date	JULY 23 RD , 1999			
Residence: City	Laval	State	Qué.	Country	Canada	Citizenship	Ca		
Post Office Address	6400 de l'Aiglon								
Post Office Address	JK								
City	Laval	State	Qué.	Zip	H7L 4W2	Country	Canada		
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Youla	Middle Initial	S.	Family Name	Tsantrizos	Suffix e.g. Jr.			
Inventor's Signature					Date	July 23, 1999			
Residence: City	Saint-Laurent	State	Qué.	Country	Canada	Citizenship	CA		
Post Office Address	1590 Champigny								
Post Office Address									
City	Saint-Laurent	State	Qué.	Zip	H4L 4P7	Country	Canada		
Name of Additional Joint Inventor, if any: <input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Bruno	Middle Initial		Family Name	Simoneau	Suffix e.g. Jr.			
Inventor's Signature					Date	July 23, 1999			
Residence: City	Laval	State	Qué.	Country	Canada	Citizenship	CA		
Post Office Address	2615 De la Volière								
Post Office Address									
City	Laval	State	Qué.	Zip	H7N 5G3	Country	Canada		
<input checked="" type="checkbox"/> Additional inventors are being listed on a supplemental sheet(s) attached hereto.									

DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name		Dominik				Middle Initial		M.		Family Name		Wernic				Suffix e.g. Jr.			
Inventor's Signature		<i>D. Wernic</i>								Date		<i>July 23, 1999</i>							
Residence: City		Laval				State		Qué.		Country		Canada				Citizenship		CA	
Post Office Address		900 des Girofées																	
Post Office Address																			
City		Laval				State		Qué.		Zip		H7X 3G5				Country		Canada	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature										Date									
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip						Country			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature										Date									
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip						Country			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.			
Inventor's Signature										Date									
Residence: City						State				Country						Citizenship			
Post Office Address																			
Post Office Address																			
City						State				Zip						Country			
<input type="checkbox"/> Additional inventors are being listed on a supplemental sheet(s) attached hereto.																			